

Supplemental Application Data Sheet

Application Information

Application number::	10/766,515
Filing Date::	01/27/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	·
CD-ROM or CD-R??::	
Number of CD disks::	•
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	•
Number of copies of CRF::	
Title::	INTEGRATED OBJECT SQUASH AND
	STRETCH METHOD AND APPARATUS
Attorney Docket Number::	021751-001210US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	10
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	•
Licensed US Govt. Agency::	·

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No

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

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Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

David

Middle Name::

Н.

Family Name::

Mullins

Name Suffix::

City of Residence::

Kensington

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

89 Kingston Road

City of Mailing Address::

Kensington

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94707

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Canada

Status::

Full Capacity

Given Name::

Steven

Middle Name::

Clay

Family Name::

Hunter

Name Suffix::

City of Residence::

San Francisco

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

107 Caselli Street

City of Mailing Address::

San Francisco

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address:: 94114

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US .

Status::

Full Capacity

Given Name::

Robert

Middle Name::

Н.

Family Name::

Russ

Name Suffix::

City of Residence::

Richmond .

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

201 Schooner Court

City of Mailing Address::

Richmond

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94804

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

William

Middle Name::

Α.

Family Name::

Wise

Name Suffix::

City of Residence::

Oakland

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

461 Hudson Street

City of Mailing Address::

Oakland

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State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94618

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: William

Middle Name:: F.

Family Name:: Sheffler

Name Suffix::

City of Residence:: Oakland

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 6524 Whitney Street

City of Mailing Address:: Oakland

State or Province of mailing address:: CA

Country of mailing address:: ..

Postal or Zip Code of mailing address:: 94609

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Christian

Middle Name:: D.

Family Name:: Hoffman

Name Suffix::

City of Residence:: Oakland

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 6601 Saroni Drive

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City of Mailing Address::

Oakland

State or Province of mailing address::

Country of mailing address::

US

CA

Postal or Zip Code of mailing address:: 94611

Correspondence Information

Correspondence Customer Number::

20350

Representative Information

Representative Customer Number::

20350

Domestic Priority Information

Application::

Continuity Type::

Parent Application:: Parent Filing Date::

This Application

An Appn claiming benefit under 35 USC

60/470,931

05/14/03

119(e) of

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name::

Pixar .

Street of mailing address::

1200 Park Avenue

City of mailing address::

<u>Emeryville</u>

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94608